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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO
09/605,503	06/28/2000	Michael T. Moore	0325.00364	5734
21363	7590 10/02/2003		EXAMINER	
CHRISTOPHER P. MAIORANA, P.C.			MALZAHN, DAVID H	
24025 GREATER MACK SUITE 200			ART UNIT	PAPER NUMBER
ST. CLAIR SHORES, MI 48080		•	2124	O1
			DATE MAILED: 10/02/2003	/

Please find below and/or attached an Office communication concerning this application or proceeding.

			PRE			
<b>*</b> ***********************************	Application No.	Applicant(s)				
Interview Summary	09/605,503	MOORE ET AL.				
merview dammary	Examiner	Art Unit				
	David H. Malzahn	2124				
All participants (applicant, applicant's representative, PTO	personnel):					
(1) <u>David H. Malzahn</u> .	(3)					
(2) <u>John Ignatowski</u> .	(4)					
Date of Interview: 30 September 2003.						
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2)□ applicant's representati	ve]				
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.					
Claim(s) discussed: 4 and 18.						
Identification of prior art discussed: None.						
Agreement with respect to the claims f)☐ was reached. g	)⊠ was not reached. h)□	N/A.				
Substance of Interview including description of the general reached, or any other comments: Applicant queried as to wo of 23 September 2003, no explanation of how the new or a pointed out by the Examiner that no new claims were present on effect on the outstanding rejection because that they did to the comment of the second of the amendal allowable, if available, must be attached. Also, where no comment of the general reached of the	why, in view of the checking of mended claims would be rejected and that the only amend not address any issue raised ments which the examiner a	of box 7b in the Ad ected was provide ading of claims 4 a ed in the outstanding greed would rende	visory Action d but it was nd 18 had ng refection. er the claims			
allowable is available, a summary thereof must be attached	1.)					
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR FORM, WICHEVER IS LATER, TO FILE A STATEMENT O Summary of Record of Interview requirements on reverse signal.	last Office action has alread THE MAILING DATE OF TH F THE SUBSTANCE OF TH	ly been filed, APPI IIS INTERVIEW S	LICANT IS UMMARY			
	DAVID DAVID PRIMA	H. MALEAHO RY EXAMINER				
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's sig	nature, if required	<del></del>			